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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

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NAME OF COMMITTEE (in full)	TYPE OR PRINT	▼		mple: If typing r the lines.	g, type	12FE4M5	
Friends of Mazie Hirono							
		_LL.			1 1 1 1	1 1 1 1	
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ADDRESS (number and street)							
Check if different							
than previously reported. (ACC)	Honolulu	1 1		1 1 1			96809
2. FEC IDENTIFICATION N	UMBER ▼		CITY			STATE A	ZIP CODE
C C00420760			IS THIS REPORT	NEW (N)	OR	AMENE (A)	STATE ▼ DISTRICT DED HI 00 L 1
4. TYPE OF REPORT (Ch. (a) Quarterly Reports: April 15 Quarterly F July 15 Quarterly F October 15 Quarter January 31 Year-En	Report (Q1) Report (Q2) riy Report (Q3) and Report (YE)	(c) 3	Election on	Primary (12P) Convention (———————————————————————————————————	oort for the:	General (1	in the State of
5. Covering Period 04 01 2014 through 06 30 2014							
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Carol-Puette							
Type of Fillit Maine Officeasure Calorruelle Junity Camor							
Type or Print Name of Treasurer Carol-Ptiette Judith Zamme Signature of Treasurer Carol-Ptiette Date Date Date							
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.							
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